MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/579026 **FILING DATE**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1							51						
2								52						
3								53						
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46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.			1					TOTAL IND.						
TOTAL DEP.				10				TOTAL DEP.						
TOTAL CLAIMS					1			TOTAL CLAIMS						

PTO-1360 (REV. 11/04)

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